



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 1834

Bib Data Sheet

| | | | | |
|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|
| SERIAL NUMBER 10/045,553 | FILING DATE 01/11/2002 RULE | CLASS 607 | GROUP ART UNIT 3762 | ATTORNEY DOCKET NO. P-10289.00 |
|-----------------------------|-----------------------------------|--------------|------------------------|--------------------------------------|

APPLICANTS

Scott B. Kokones, Minneapolis, MN;

Shahn S. Sage, Andover, MN;

** CONTINUING DATA *****

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/11/2002

| Foreign Priority claimed | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no | STATE OR COUNTRY | SHEETS | TOTAL | INDEPENDENT |
|---------------------------------|--|---------------------|-----------|-------|-------------|
| 35 USC 119 (a-d) conditions met | <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after | MN | DRAWING 9 | 11 | 5 |
| Verified and Acknowledged | <i>Examiner's Signature</i> <i>Initials</i> | | | | |

ADDRESS

27581
 MEDTRONIC, INC.
 710 MEDTRONIC PARKWAY NE
 MS-LC340
 MINNEAPOLIS, MN
 55432-5604

TITLE

Neurostimulation lead stylet handle

| | | |
|------------|---|--|
| FILING FEE | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) |
| RECEIVED | | |

908

| | |
|--------------------------|-------------|
| <input type="checkbox"/> | Other _____ |
| <input type="checkbox"/> | Credit |